



IDAHO DEPARTMENT OF HEALTH & WELFARE

Developmental Disability Agency Codes – Idaho Medicaid

Procedure Code	Modifier	Description	Allowed Amt.
8296A		Interpretive Services (1 Unit = 1 Hour)	\$12.16
90801		Psychiatric Diagnostic Interview and Exam (1 Unit = 15 Minutes)	\$16.79
90847		Family Medical Psychotherapy (1 Unit = 15 Minutes)	\$12.84
90847	U4	Family Medical Psychotherapy for Nursing Facility Participants (1 Unit = 15 Minutes)	\$13.10
90853		Group Medical Psychotherapy (1 Unit = 15 Minutes)	\$3.89
90853	U4	Group Medical Psychotherapy for Nursing Facility Participants (1 Unit = 15 Minutes)	\$3.97
90862		Pharmacological Management	\$50.26
90887		Collateral Contact (1 Unit = 15 Minutes)	\$9.94
92506		Speech Evaluation (1 Unit = 15 Minutes)	\$14.00
92507		Individual Speech Therapy (1 Unit = 15 Minutes)	\$14.00
92508		Group Speech Therapy (1 Unit = 15 Minutes)	\$4.37
96101		Psychiatric Testing for Diagnosis/Evaluation - Psychologist/Physician (1 unit = 1 hour)	\$60.51
96102		Psychiatric Testing for Diagnosis/Evaluation - Technician (1 unit = 1 hour)	\$42.53
96103		Psychiatric Testing for Diagnosis/Evaluation (With Computer And Professional Interpretation) (1 unit = 1 test)	\$26.51
97001		Physical Therapy Evaluation (1 Unit = 15 Minutes)	\$14.00
97003		Occupational Therapy Evaluation (1 Unit = 15 Minutes)	\$14.00
97110		Individual Physical Therapy (1 Unit = 15 Minutes)	\$14.00
97150		Group Physical Therapy (1 Unit = 15 Minutes)	\$3.59
97535		Individual Occupational Therapy (1 Unit = 15 Minutes)	\$14.00
97535	HQ	Group Occupational Therapy (1 Unit = 15 Minutes)	\$3.59
97537		Home/Community Individual Developmental Therapy for Adults (1 Unit = 15 Minutes)	\$5.01
97537	HQ	Home/Community Group Developmental Therapy for Adults (1 Unit = 15 Minutes)	\$2.14
H0004		Individual Medical Psychotherapy (1 Unit = 15 Minutes)	\$13.10
H0004	U4	Individual Medical Psychotherapy for Nursing Home Participants (1 Unit = 15 Minutes)	\$13.10
H0004	HM	Supportive Counseling (1 Unit = 15 Minutes)	\$8.00
H0024		Intensive Behavioral Intervention – Consultation (1 Unit = 15 Minutes)	\$11.35
H2000		Developmental Therapy Evaluation (1 Unit = 15 Minutes)	\$4.53
H2000	U4	Developmental Therapy Evaluation for Nursing Facility	\$4.53

		Participants (1 Unit = 15 Minutes)	
H2011		Community Crisis Support (1 Unit = 15 Minutes)	\$11.35
H2014		Individual Developmental Therapy – Center for Children (1 Unit = 15 Minutes)	\$4.53
H2014	HQ	Group Developmental Therapy – Center for Children (1 Unit = 15 Minutes)	\$1.80
H2014	U4	Individual Developmental Therapy for Nursing Facility Participants (1 Unit = 15 Minutes)	\$5.01
H2014	HQ/U4	Group Developmental Therapy for Nursing Facility Participants (1 Unit = 15 Minutes)	\$2.14
H2019		Intensive Behavioral Intervention – Professional (1 Unit = 15 Minutes)	\$11.35
H2019	HM	Intensive Behavioral Intervention – Paraprofessional (1 Unit = 15 Minutes)	\$5.10
H2021		Individual Developmental Therapy – Home/Community for Children (1 Unit = 15 Minutes)	\$5.01
H2021	HQ	Group Developmental Therapy – Home/Community for Children (1 Unit = 15 Minutes)	\$2.14
H2032		Center Based Individual Developmental Therapy for Adults (1 Unit = 15 Minutes)	\$4.53
H2032	HQ	Center Based Group Developmental Therapy for Adults (1 Unit = 15 Minutes)	\$1.80
T1013		Sign Language Services (1 Unit = 15 Minutes)	\$12.50
T1028		Social History/Evaluation (1 Unit = 15 Minutes)	\$9.94
T2024		Comprehensive Intensive Behavioral Intervention Assessment (1 Unit = 15 Minutes)	\$11.35

If you have any questions please contact Gynna Loper, Idaho Medicaid Office of Reimbursement Policy, at (208) 364-1994 or email at LoperG@dhw.idaho.gov.
Updated: July 1, 2007